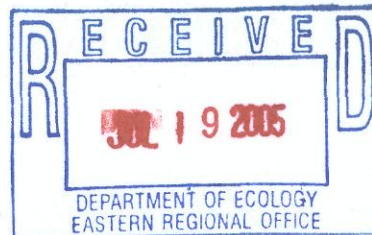




STATE OF WASHINGTON  
**APPLICATION FOR CHANGE/TRANSFER  
OF WATER RIGHT**

For filing with Ecology or with County Conservancy Boards



**A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(Check all that apply.)

- ☐ Change purpose(s) of use  
☐ Add purpose(s) of use  
☒ Change point(s) of diversion/withdrawal  
☒ Add point(s) of diversion/withdrawal  
☐ Change/transfer place of use  
☐ Other (i.e. consolidation, intertie, trust water)

Explain: \_\_\_\_\_

**FOR OFFICE USE ONLY**

CHANGE No. CS3-\*34217J(E) WRIA 32  
DATE ACCEPTED 12 / 29 / 2005 BY KATHERBACH  
FEE \$ 10.00 REC'D 07 / 19 / 2005  
CHECK No. 623  
SEPA: ☒ Exempt ☐ Not exempt  
Columbia County

**\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\***

**1. Applicant Information:**

APPLICANT/BUSINESS NAME <u>BRYAN MARTIN</u>	PHONE NO. <u>(509) 520-1517</u>	FAX NO. ( )
ADDRESS <u>1012 S. 5TH ST</u>		
CITY <u>DAYTON</u>	STATE <u>WA</u>	ZIP CODE <u>99328</u>
CONTACT NAME (IF DIFFERENT FROM ABOVE)		
PHONE NO. ( )		
FAX NO. ( )		
ADDRESS		
CITY	STATE	ZIP CODE

**2. Water Right Information:**

WATER RIGHT OR CLAIM NUMBER <u>CERTIFICATE # 217(E)</u>	RECORDED NAME(S) <u>BRYAN A MARTIN</u>
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

**Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.**

**FOR OFFICE USE ONLY**

APP. NO. 53-\*34217J(E) PERMIT NO. \_\_\_\_\_ CERT. NO. 53-\*34217J CERT. OF CHANGE NO. (E)

parcel 2-010-38-035-3740  
cert name: Wolfe H G



2005 01 JUL

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
TOUCHET RIVER	X	SW	SE	35	10 N	38 E	2-010-38-035-4380	

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
TOUCHET RIVER	X	SW	SW	35	10 N	38 E	2-010-38-035-3740	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?  
 EXISTING: ☒ YES ☒ NO      PROPOSED: ☒ YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME: ROWE LIVING TRUST

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
AGRICULTURAL IRRIGATION	0.660 CFS .44 CFS	198	YEAR ROUND 9/15 - 4/1 4/1 - 9/15

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
AGRICULTURAL IRRIGATION	0.660 CFS .44 CFS	198	YEAR ROUND 9/15 - 4/1 4/1 - 9/15

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:  
 43.13 ACRE TRACT OF THE DAVIS SHORT PLAT, RECORDED IN  
 BOOK 6 OF SURVEYS @ PAGES 100-102, RECORDS OF COLUMBIA COUNTY

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
SW	SW	35	10 N.	R38E	COLUMBIA	2-010-38-035-3740	43.13

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☒ YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:  
 - SAME AS EXISTING -

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
							33

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☐ YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME:

12-29-05  
Kaye  
per ph. call  
w/ MR. MATH

33 acres  
auth.

12-29-05  
Kaye



Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ☒ ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?  
☐ YES ☒ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

6. Remarks and Other Relevant Information:

THE WATER RIGHT WAS TRANSFERRED WITH PURCHASE OF
THE PROPERTY. REAL ESTATE TAXES HAVE BEEN PAID
IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

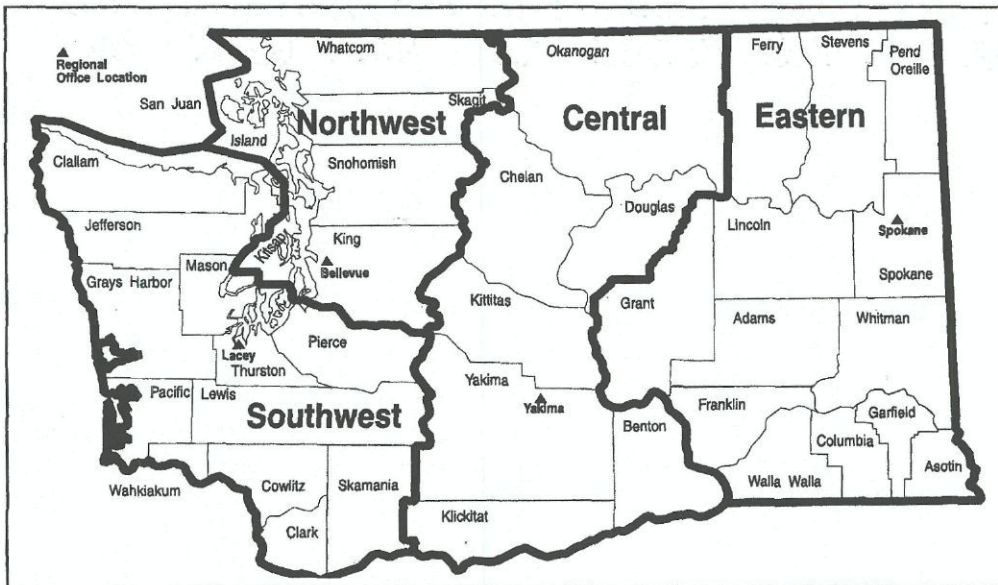
<u>Bryan Martin</u> (Applicant)	<u>7   14   05</u> (Date)
<u>Bryan Martin</u> (Water Right Holder)	<u>7   14   05</u> (Date)
<u>Bryan Martin</u> (Land Owner(s) of Existing Place of Use)	<u>7   14   05</u> (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> APPLICATION FEE NOT ENCLOSED	<input type="checkbox"/> MAP NOT INCLUDED or INCOMPLETE
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____	DATE: ____/____/____

**IMPORTANT!**

Submit your application to Ecology at the regional office for the area of proposed or existing water use or at a Conservancy Board with jurisdiction. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application or whether a County Conservancy Board with jurisdiction exists, contact the Water Resources program at the regional office in which your project is located.



Department of Ecology  
Central Regional Office  
15 W. Yakima Avenue, Suite 200  
Yakima, WA 98902  
Telephone: (509) 575-2490

Department of Ecology  
Eastern Regional Office  
N. 4601 Monroe, Suite 202  
Spokane, WA 99205-1295  
Telephone: (509) 329-3400

Department of Ecology  
Northwest Regional Office  
3190 - 160<sup>th</sup> Avenue SE  
Bellevue, WA 98008-5452  
Telephone: (425) 649-7000

Department of Ecology  
Southwest Regional Office  
PO Box 47775  
Olympia, WA 98504-7775  
Telephone: (360) 407-6300

*If you need assistance in the application process or need this application in an alternate format, please call the Water Resources Program at (360) 407-6600 or TTY (for the speech or hearing impaired) at 711 or 1-800-833-6388.*